



City of Wyoming Parks and Recreation Volunteer Application Form

CIRCLE AREAS OF INTEREST: **SENIORS** **PARKS** **RECREATION** **T.E.A.M.21**

Name _____ Maiden/Other Names: _____		
(LAST)	(FIRST)	(MIDDLE)
Address _____ City _____ State _____ Zip _____		
Home Phone _____ Work Phone _____ E-Mail Address _____		
Driver's License Number _____ State _____ Expiration _____		
Gender _____ Date of Birth _____ Race _____		
Parent's Names (IF APPLICANT UNDER 18) _____ Phone _____		

Contact In Case of Emergency:

(Name) _____	(Relationship) _____	(Phone) _____
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Personal or Professional References (Please Exclude Relatives)

1. Name _____	Relationship _____	Phone _____
Address _____	City _____ State _____	Zip _____
2. Name _____	Relationship _____	Phone _____
Address _____	City _____ State _____	Zip _____

Have you ever been convicted of a crime, other than a minor traffic offence? ☐ Yes ☐ No If yes, please explain below:

Please list any skills, foreign languages, hobbies, or interests you have that might be helpful in your volunteer work:

Availability:	Mon.	Tues.	Weds.	Thur.	Fri.	Sat.	Sun.
Morning	_____	_____	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____	_____	_____
Evening	_____	_____	_____	_____	_____	_____	_____

Office Use Only	
PSOR _____	Date _____
Criminal Records _____	Date _____

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Applicants Authorization & Agreement
(Please read the following carefully before signing)

I hereby certify that all statements on this application are made truthfully, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being accepted as a volunteer, or if accepted may result in my dismissal.

I authorize the City of Wyoming to secure additional relevant information from my employer, prior employer, educational institution or any other persons or organizations concerning my employment, education, disciplinary information or any other relevant information, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing this information to the City of Wyoming.

In accordance with A.D.A. requirements, if I require special accommodations to perform my services, I must notify the Wyoming Parks and Recreation Department of that need within 182 days after I knew or reasonably should have known that special accommodations were needed. Failure to do so will bar me from alleging that the City of Wyoming has not accommodated me as required by law.

I hereby authorize the City of Wyoming to secure a criminal conviction history from the appropriate law enforcement agencies, should the City determine it necessary to do so. In addition, I will furnish the necessary identification for such an investigation to take place.

I hereby grant the City of Wyoming permission to use and display my likeness in photographs(s)/video in any publication, multimedia production, display, advertisement or World-Wide Web publication for Wyoming Parks and Recreation or its constituent departments.

I agree to abide by all program rules and regulations set forth by the Wyoming Parks and Recreation Department. I understand that my volunteer services may be terminated at any time by that department. I also understand that there are certain inherent risks involved in any activity. I hereby release, discharge and hold harmless the City of Wyoming and its officers, employees, volunteers, contributing sponsors and affiliate organizations from any and all liability for any physical or mental injury or aggravation of any pre-existing condition, illness or disability, death, loss of enjoyment or any other harm or loss of any nature which may be sustained by me while serving as a volunteer for the Wyoming Parks and Recreation Department.

Please print name with one letter in each box.

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First Name

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Last Name

Applicant's Signature

Date

Please print name with one letter in each box.

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First Name

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Last Name

Parent's Signature (If Applicant Under 18)

Date

*Your signature indicates your approval for your child's participation as a volunteer in this program.

If you have any questions or concerns regarding this application, please call our office at (616) 530-3164.

The Wyoming Parks and Recreation Department promotes a non-discrimination policy that ensures participation for all regardless of race, religion, sex, economic status or disability.

Notification of Mandated Reporter Status

The Michigan Child Protection Law, 1975 PA 238, MCL 722.621 et. seq., requires the reporting of child abuse and neglect by certain persons (called mandated reporters) and permits the reporting of child abuse and neglect by all persons. The Child Protection Law includes the legal requirements for reporting, investigating, and responding to child abuse and neglect.

Under the law, employees and volunteers of a regulated child care provider, such as T.E.A.M. 21, are listed as mandated reporters. Mandated reporters are always required to report suspected child abuse and neglect to the Department of Human Services (DHS)/Children's Protective Services (CPS) division. The report must be made directly to DHS. There are civil and criminal penalties for a mandated reporter's failure to make a report. Likewise, there is a civil and criminal immunity for someone making a report in good faith.

The Child Protection Law requires mandated reporters to make an immediate verbal report to CPS/DHS upon suspecting child abuse and neglect, followed by a written report within 72 hours. The written report is the completion of the Report of Suspected Child Abuse or Neglect form (DHS-3200). These forms are available from your Site Coordinator.

Phone Number for the Verbal Report: (855) 444-3911 (Centralized Intake)

Written Report can be faxed to either of the following numbers (within 72 hours):

(616) 977-1154

(616) 977-1158

OR Written Report can be emailed to the following email address (within 72 hours):

DHS-CPS-CIGroup@michigan.gov

The reporter is not expected to investigate the matter, know the legal definitions of child abuse and neglect, or even know the name of the perpetrator. The Child Protection Law is intended to make reporting simple and places responsibility for determining appropriate action with the Children's Protective Services (CPS) division of the Department of Human Services. The authority and actions of CPS are based on requirements in the Child Protection Law.

Mandated reporters must also notify the head of their organization of the report. Reporting the suspected allegations of child abuse and/or neglect to the head of the organization does not fulfill the requirement to report directly to CPS/DHS.

All employees and volunteers of T.E.A.M. 21 must read and sign below. Your signature acknowledges your understanding of state mandates regarding suspected child abuse and neglect.

- I am aware that abuse and neglect of children is against the law.
- I have been informed of the T.E.A.M. 21 policy on child abuse and neglect.
- I understand that, as an employee or volunteer of T.E.A.M. 21, I am a mandated reporter of child abuse and neglect under State law, and I am required as such to immediately report suspected child abuse and neglect to children's protective services, according to the process outlined above.

PRINT NAME

POSITION/VOLUNTEER

SIGNATURE

DATE